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Bib Data Sheet

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|-----------------------------|-----------------------------------|--------------|------------------------|--------------------------------------|
| SERIAL NUMBER<br>10/808,346 | FILING DATE<br>03/25/2004<br>RULE | CLASS<br>600 | GROUP ART UNIT<br>3766 | ATTORNEY<br>DOCKET NO.<br>033954-002 |
|-----------------------------|-----------------------------------|--------------|------------------------|--------------------------------------|

## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 06/07/2004

| Foreign Priority claimed        | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | STATE OR<br>COUNTRY              | SHEETS       | TOTAL        | INDEPENDENT |
|---------------------------------|---|----------------------------------|--------------|--------------|-------------|
| 35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | Met after<br>Allowance           |              |              |             |
| Verified and<br>Acknowledged    |   | Examiner's Signature<br>Initials | DRAWING<br>5 | CLAIMS<br>23 | CLAIMS<br>3 |

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## TITLE

Method and system for controlling blood pump flow

|                 |   |  |
|-----------------|---|--|
| FILING FEE      | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____ |
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